JUI

HE BUAKU UF PATENTA	OM THE EXAMINER TO APPEALS AND INTERFE		ocket Number (Optional) 105984-0819
	In re Application of	ey Simons, Jos	seph D. Kidder, Nicholas A. Lang
	Application Number 09/616		Filed July 14, 2000
	For UPPER LAYE LAYER TEST		DEVICE INCLUDING A PHYSIC.
	Art Unit		Examiner
	2665		D. J. Ryman
applicant hereby appeals to the	e Board of Patent Appeals an	d Interferences fro	om the last decision of the examiner.
he fee for this Notice of Appea			\$500.00
Applicant claims small ent above is reduced by half, a	ty status. See 37 CFR 1.27. and the resulting fee is:	Therefore, the fe	s 250.00
x A check in the amount of t	he fee is enclosed.		
Payment by credit card. F	orm PTO-2038 is attached.		
The Director has already by I have enclosed a duplicate	een authorized to charge fee e copy of this sheet.	s in this application	on to a Deposit Account.
	norized to charge any fees w		ired, or credit any overpayment to py of this sheet.
A petition for an extension	of time under 37 CFR 1.136	(a) (PTO/SB/22) is	s enclosed.
am the applicant /inventor.			A M
assignee of record of the	tement under 37 CFR 3.73(b		Signature Reza Mollaaghababa Typed or printed name
attorney or agent of rec	ord.		•
Registration number			(617) 439-2000
x attorney or agent acting	under 37 CFR 1.34.		Telephone number
Registration number if acti	ng under 37 CFR 1.34. 43	3,810	June 13, 2005 Date
	ors or assignees of record of tr one signature is required, see	ne entire interest or below*.	their representative(s) are required.
DTE: Signatures of all the invent bmit multiple forms if more than			
bmit multiple forms if more than	ms are submitted.		

Complete if Known

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 09/616,477				
FEE TRANSMITTAL			Filing Date	iling Date July 14, 200				
			First Named Inv	amed Inventor Chris R. No				
For FY 2005			Examiner Name		D. J. Ryman			
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2665		2665			
TOTAL AMOUNT OF PAYMENT (\$) 250.00			Attorney Docket No. 105984-0819					
METHOD OF PAYMEN	「(check all	that apply)						
X Check Credit C	ard	Money Order	Nor	ne Other (please iden	tify):		
Deposit Account Depos	sit Account Nun	nber: 141449 D	eposit Acc	ount Name:	Nutte	r McClennen &	Fish LLP	
For the above-identi	fied deposit	account, the Di	rector is	hereby authorize	ed to: (che	ck all that apply)		
Charge fee(s)	indicated b	elow		Charg	e fee(s) ind	dicated below, ex	cept for t	he filing fee
Charge any ac		(s) or underpayi and 1.17	ment of	x Credit	any overp	ayments		
FEE CALCULATION	1. 1						-	
1. BASIC FILING, SEARCH	, AND EXA	MINATION FEE	S					
	FILIN	NG FEES	SE	ARCH FEES	EXAMIN	NATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Foos	Paid (\$)
Utility	300	150	500	250	200	100	1000	<u> </u>
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
	300	150	500	250	600	300		
Reissue		100	0	0	000	0		
Provisional	200	100	U	U	U	U		OII F414.
2. EXCESS CLAIM FEES							Fee (\$)	Small Entity Fee (\$)
Fee Description Each claim over 20 (includi	na Reissnes	2)					50	25
Each independent claim over	-	-					200	100
Multiple dependent claims	or 5 (morad)	ing reissaes,					360	180
Total Claims Extra (Claime	Fee (\$)	Foo I	aid (\$)	M	ultiple Depende		
l - 			1 66 1	aiu (Ψ)	_		ee Paid (
120 = x = <u>Fee (\$)</u> <u>Fee Paid (\$)</u>								
		Fee (\$)	Fee F	Paid (\$)				
-3=		= _						
• • • • • • • • • • • • • • • • • • • •	3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1	wings exce	ed 100 sneets o	i paper e fee du	e is \$250 (\$125 f	onicany n or small e	ntity) for each a	computer Iditional 5	0
sheets or fraction thereo	of. See 35 V	U.S.C. 41(a)(1)	(G) and	37 CFR 1.16(s).	or sinan c	inity) for each ac	Jantional 5	•
	tra Sheets			dditional 50 or frac	tion therec	of <u>Fee (\$)</u>	Fee	Paid (\$)
- 100 =		/50		(round up to a who	ole number)	x =	=	
4. OTHER FEE(S)							<u>Fees</u>	Paid (\$)
Non-English Specification	on, \$130 f	ee (no small ent	ity disc	ount)				
Other (e.g., late filing su	rcharge): <u>2</u>	401 Notice of	appeal				2	50.00
SUBMITTED BY 0 0 0								
Signature //	1	14		Registration No. (Attorney/Agent)	43,810	Telephone	(617) 43	9-2000
Name (Print/Type) Reza Mol	laaghabab	oa				Date	June 13	3, 2005

I hereby an envel	certify that this corresponde addressed to: Comi	ndence is being deposited with t	ransmittal he U.S. Postal Service w 1450, Alexandria, VA 22	with sufficient postage as First Class Mail, in 313-1450, on the date shown below.
Dated:	June 13, 2005	Signature:	1/2	(Reza Mollaaghababa)